City of Burbank Park and Recreation and Comm	nunity Services I	Rec. #
BURBANK ADULT CENTER DAY TRIPS REGISTR	ATION Canc. D	oate Intl
Tour Name & #	Tour Da	ateSeat #
Name	BSA	ateSeat # C#
Address	Citv	Zip
Phone ()		
Phone ()E-mail Other Important Info Emergency Contact		
Other Important Info	Allergies	
Emergency Contact	Phone()
I hereby absolve the City of Burbank, its employees, and officers fro participation in these activities. I have taken care to enroll in a progression. I grant the City of Burbank permission to use my photogra marketing City activities. I understand that no compensation shall be images shall become the sole property of the City of Burbank. I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING A OF THE POTENTIAL DANGERS INCIDENTAL TO PARTICIPATION IN SERVICES PROGRAM AND I AM FULLY AWARE OF THE LEGAL COBy my signature, I hereby certify that I am eighteen (18) year	ram appropriate to my physions and images for the purple given for use of these phonon HAVE BEEN FULLY AND THE PARK, RECREATION AND SEQUENCES OF SIGNING	cal abilities and/or medical pose of publicizing and stographs and that these D COMPLETELY ADVISED AND COMMUNITY
Signature		Date